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APPLICANTS

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\*\* CONTINUING DATA \*\*\*\*\*

This application is a 371 of PCT/IL99/00386 07/14/1999

\*\* FOREIGN APPLICATIONS \*\*\*\*\*

\*\* SMALL ENTITY \*\*

Foreign Priority claimed <input checked="" type="checkbox"/> yes <input type="checkbox"/> no 35 USC 119 (a-d) conditions met <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance Verified and Acknowledged Examiner's Signature: <i>[Signature]</i> Initials: <i>[Initials]</i>	STATE OR COUNTRY ISRAEL	SHEETS DRAWING 6	TOTAL CLAIMS 18	INDEPENDENT CLAIMS 2
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TITLE  
 Analgesic from snake venom

FILING FEE  RECEIVED 510	FEES: Authority has been given in Paper No. _____ to charge/credit DEPOSIT ACCOUNT No. _____ for following:	<input type="checkbox"/> All Fees <input type="checkbox"/> 1.16 Fees ( Filing ) <input type="checkbox"/> 1.17 Fees ( Processing Ext. of time ) <input type="checkbox"/> 1.18 Fees ( Issue )
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